

121503  
1707UTILITY PATENT APPLICATION  
TRANSMITTAL UNDER 37 CFR 1.53(b)ATTORNEY DOCKET 84415AEK  
Customer No. 01333

To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA. 22313-1450

AN ALIGNED LIQUID CRYSTAL LAYER  
CONTAINING ONIUM SALTS AND PROCESS  
FOR INCREASING THE TILT

First Named Inventor (or Application Identifier):

Deepak Shukla, et al

Enclosed are:

1.  Specification

2.  1 Sheet(s) of drawing(s)

3.  Information Disclosure Statement Under 37 CFR 1.97.

4. Combined Declaration for Patent Application and Power of Attorney:

4a.  New

4b.  Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 11 completed)

6.  Assignment of the invention to  
Eastman Kodak Company

7.  Certified copy of a priority

8.  Associate Power of Attorney

5.  Incorporation by Reference (useable if Box 4b is

checked) The entire disclosure of the prior application, from  
which a copy of the oath or declaration is supplied under Box 4b,  
is considered as being part of the disclosure of the accompanying  
application and is hereby incorporated by reference therein.

9.  Deletion of Inventor(s).

Signed statement attached deleting inventor(s) named  
in the prior application, see 37 CFR 1.63(d)(2) and  
1.33(b).

10.  If a 111A application prior to examination of the above-identified application, amend the specification at Page 1,  
after the title, by inserting the following:

## --CROSS REFERENCE TO RELATED APPLICATION

Reference is made to and priority claimed from U.S. Provisional Application Serial No. ,  
filed , entitled .

If a **CONTINUING APPLICATION**, check appropriate box and supply the requisite information:

11.  Continuation  Divisional  Continuation-in-part (CIP) of prior application No. ,

12.  Please address all written communications to Paul A. Leipold, Patent Legal Staff,  
Eastman Kodak Company, 343 State Street, Rochester, NY 14650-2201.  
Please Direct all telephone calls to Arthur E. Kluegel at 585-477-2625.

The filing fee has been calculated as shown below:

FOR:	NO. FILED	NO. EXTRA	RATE	FEE
BASIC FEE				\$ 770
TOTAL CLAIMS	20	- 20 = 0	x 18 =	\$ 0
INDEPENDENT CLAIMS	2	- 3 = -1	x 86 =	\$ 0
MULTIPLE DEPENDENT CLAIM PRESENTED			+ 290	\$ 0
			<b>TOTAL</b>	<b>\$ 770</b>

Please charge my Eastman Kodak Company Deposit Account No. 05-0225 in the amount of **\$ 770**

**A duplicate copy of this sheet is enclosed**

The Commissioner is hereby authorized to charge any additional filing fees required under  
37 CFR 1.16 or credit any overpayment to Eastman Kodak Company Deposit Account No. 05-0225.

**A duplicate copy of this sheet is enclosed.**

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16018 U.S. PTO  
10/736342

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